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CONFIRMATION NO. 6975

<b>SERIAL NUMBER</b> 10/732,767	<b>FILING OR 371(c) DATE</b> 12/10/2003 <b>RULE</b>	<b>CLASS</b> 530	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> RDID 02010 US	
<b>APPLICANTS</b> Mitali Ghoshal, Noblesville, IN; Gerald Sigler, Carmel, IN; Anlong Ouyang, Indianapolis, IN; Richard Root, Fishers, IN;					
<b>** CONTINUING DATA *****</b> <i>jsa</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>js</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/17/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>                    </u> <u>                    </u> Examiner's Signature                      Initials		<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 13	<b>INDEPENDENT CLAIMS</b> 10
<b>ADDRESS</b> 23690					
<b>TITLE</b> Reagents for detecting efavirenz					
<b>FILING FEE RECEIVED</b> 1502	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		